

FILED

JUN 9 2008

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

E-filing

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

VRW

James E. Harvey / aka: Abdul D. SHAKUR

Plaintiff,

CV 08

2894

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

vs.
Robert Hotel Warden -
J. Puente - IGI

K. Brandon / Cpt 25d
COLR Director during 1/24/08

Defendant.

(PR)

I, James E. Harvey, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: NONE Net: N/A

Employer: N/A

If the answer is "no," state the date of last employment and the amount of the gross and net salary and wages per month which you received. (If you are imprisoned, specify the last place of employment prior to imprisonment.)

2. Have you received, within the past twelve (12) months, any money from any of the following sources:

- a. Business, Profession or self employment Yes ___ No ☒
- b. Income from stocks, bonds, or royalties? Yes ___ No ☒
- c. Rent payments? Yes ___ No ☒
- d. Pensions, annuities, or life insurance payments? Yes ___ No ☒
- e. Federal or State welfare payments, Social Security or other government source? Yes ___ No ☒

If the answer is "yes" to any of the above, describe each source of money and state the amount received from each.

N/A

3. Are you married? *But have been separated for the past five years.* Yes ☒ No ___

Spouse's Full Name: *N/A*

Spouse's Place of Employment: *N/A*

Spouse's Monthly Salary, Wages or Income:

Gross \$ *N/A* Net \$ *N/A*

4. a. List amount you contribute to your spouse's support: \$ *N/A*

b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

N/A

5. Do you own or are you buying a home? Yes ☐ No ☒

Estimated Market Value: \$ N/A Amount of Mortgage: \$ N/A

6. Do you own an automobile? Yes ☐ No ☒

Make N/A Year N/A Model N/A

Is it financed? Yes N/A No N/A If so, Total due: \$ N/A

Monthly Payment: \$ N/A

7. Do you have a bank account? Yes ☐ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: N/A

Present balance(s): \$ N/A

Do you own any cash? Yes ☐ No ☒ Amount: \$ N/A

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ☐ No ☒

N/A

8. What are your monthly expenses?

Rent: \$ N/A Utilities: N/A

Food: \$ N/A Clothing: N/A

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>
<u>N/A</u>	\$ <u>N/A</u>	\$ <u>N/A</u>

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

n/a

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

n/a

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

5/22/08

DATE

James E. H. [Signature]

SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATION OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of James Earl Harvey C48884 for the last six months at Pelican Bay State Prison where he is confined.

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$8.33 and the average balance in the prisoner's account each month for the most recent 6-month period was \$19.87. (20% = \$3.97)

Dated: 5/28/08

L. Ward auto S. Lee
Authorized officer of the institution



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.
ATTEST: 5-28-08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY J. Kleppin
TRUST OFFICE

Case Number: _____

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of JAMES HARVEY for the last six months
[prisoner name]
Pelican Bay State Prison where (s)he is confined.
[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ _____ and the average balance in the prisoner's account each month for the most recent 6-month period was \$ _____.

Dated: _____

[Authorized officer of the institution]

CALIFORNIA DEPARTMENT OF CORRECTIONS
 PELICAN BAY STATE PRISON
 INMATE TRUST ACCOUNTING SYSTEM
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: NOV. 01, 2007 THRU MAY 28, 2008

ACCOUNT NUMBER: C48884 BED/CELL NUMBER: DF041 000000112L
 ACCOUNT NAME: HARVEY, JAMES EARL ACCOUNT TYPE: 1
 PRIVILEGE GROUP: D

TRUST ACCOUNT ACTIVITY

DATE	TRAN CODE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
11/01/2007		BEGINNING BALANCE					0.01
12/21	D300	CASH DEPOSIT	2667 #120		50.00		50.01
		ACTIVITY FOR 2008					
01/03	FC05	DRAW-FAC 5	2810 D-4			20.01	20.01
01/30	W502	POSTAGE CHARG	3253			0.41	19.60
01/30	W502	POSTAGE CHARG	3253			0.41	19.19
02/04	FC05	DRAW-FAC 5	3365 D-4			18.75	0.44
02/14	W502	POSTAGE CHARG	3570			0.41	0.03
03/24	W536	COPAY CHARGE	4154M03/14			0.03	0.00

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
05/22/2008	H114	COPAY FEE, MED.	5084M05/19	5.00

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.01	50.00	50.01	0.00	5.00	0.00

CURRENT
 AVAILABLE
 BALANCE

5.00-



THE WITHIN INSTRUMENT IS A CORRECT
 COPY OF THE TRUST ACCOUNT MAINTAINED
 BY THIS OFFICE.
 ATTEST: 5-28-08
 CALIFORNIA DEPARTMENT OF CORRECTIONS
 BY J. Kleppin
 TRUST OFFICE